PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docke: Number

10/507429

		CLAIMS										
	·····		lumn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY				
	TOTAL CLAIN						RATE	FEE		RATE	FEE	
	FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE .	OF	DACIC CE	
-	TOTAL CHARG	35 1	35 minus 20=		-15		XS 9=		ÖF	XS18=	270	
11-	NDEPENDENT		minus 3 =	-12.			X43=		OR	X86=	1032	
Ľ	MULTIPLE DEP	ENDENT CLAIM					+145=	1	OR		1002	
•	* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OF		2222
	CLAIMS AS AMENDED - PART II								· L			THAN
_		(Column 1)		(Colum		(Column 3)		SMAL	ENTITY	OR		ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=		XS 9=		OR	XS18=	
AME	Independent			<u> </u>		=	X43=			OR	X86=	l
L	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT (CLAIM			+145=		7	+290=	
		•					L	TOTAL		OR	TOTAL	
		(Column 1)		(Columr	2)	(Column 3)	ΑC	DIT. FEE	L	JOR ,	ADDIT. FEE	
	T	CLAIMS		HIGHES		(Column 3)	_		,			
ENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	** '		=		XS 9=		OR	X\$18=	
AME.	Inaependent	·	Minus	***		=		X43=		OR	X86=	
_	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	ENDENT C	LAIM		\vdash			107		
					•	•		145=		OR.	+290=	.,
							ADI	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Column	2). (Column 3)						
:		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FOI	R SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=	
	Independent		Minus	***		= .	-	43=		-	X86=	
1	FIRST PRESEI	NTATION OF MU	LTIPLE DEP	ENDENT CL	MIA		<u> </u>	.45=		OR	700-	
,	• • • • • • • • • • • • • • • • • • •		•				+	145=		OR	+290=	
- 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ;	TOTAL	
	The "Highart Ni		d C 111 1				AUU	IT. FEE L		AL	DIT. FEE	